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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond election of Information unless it displays a valid OMB control number. Application Number 10/729 339 Filing Date TRANSMITTAL **DECEMBER 04, 2003** First Named Inventor **FORM** TAYLOR Art I buit Examiner Name UNKNOWN (to be used for all correspondence after initial filing) Attorney Docket Number DE010DT-1 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify Terminal Disclaimer **Extension of Time Request** Request for Refund **Express Abandonment Request** CD. Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) CONFIRMATION NO.: 1133 Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name ORSCHELN MANAGEMENT CO Signature Printed name MICHAEL K. BOYER Reg. No. Date **DECEMBER 01, 2004** 33,085 3 472-9306 7 oʻ CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450. Alexandria, VA 22313-1450 on the date shown below: Signature Date DECEMBER 01, 2004 MICHAEL K. BOYER Typed or printed name

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Three will very longening upon the individual cases. Any comments on the amount of time you require to complete on its form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissionor for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(c)) Docket No. DE010DT-1									
In Re Application Of: DONALD W. TAYLOR ET AL.									
	Serial No.	Filing Date	Examiner	Group Art Unit					
1	10/729,339	DECEMBER 04, 2003	UNKNOWN	1711					
Title:	Title: METAL ACRYLATES AS CURING AGENTS FOR POLYBUTADIENES, MELAMINES AND EPOXY								
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Address to: Assistant Commissioner for Patents Washington, D.C. 20231									
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	1.	a Final Action under 37 CFR 1.1	13, or						
	2.	a Notice of Allowance under 37 C	OFR 1.311,						
	which	ever occurs first.							
	Also submitted herewith is:								
	a certification as specified in 37 CFR 1.97(e);								
		OR							
	the fee set forth in 37 CFR 1.17(p) for submission of an Information Disclosure Statement under 37 CFR 1.97(c).								

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	SURE STATEMENT (c))	Docket No. DE010DT-1							
In Re Application Of: DONALD W. TAYLOR ET AL.									
Serial No. Filing Date 10/729,339 DECEMBER 04, 2003		Examiner UNKNOWN	Group Art Unit 1711						
Title: METAL ACRYLATES AS CURING AGENTS FOR POLYBUTADIENES, MELAMINES AND EPOXY FUNCTIONAL COMPOUNDS CONFIRMATION NO.: 1133									
Payment of Fee (Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p)) A check in the amount of is attached. The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. 15-0680 as described below. A duplicate copy of this sheet is enclosed. Charge the amount of Credit any overpayment. Charge any additional fee required. Certificate of Transmission by Facsimile* Certificate of Transmission by Facsimile* Certificate of Transmission by Facsimile* Certificate of Mailing by First Class Mail C									
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